

UNITED STATES DISTRICT COURT
FOR THE
E.D. DISTRICT OF N.Y.

UNITED STATES OF AMERICA

Case No. 1-98-cr-00196-RR
(write the number of your criminal
case)

v.

JUSTIN VOLPE

Write your full name here.

MOTION FOR SENTENCE
REDUCTION UNDER
18 U.S.C. § 3582(c)(1)(A)
(Compassionate Release)
(*Pro Se* Prisoner)

NOTICE

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Does this motion include a request that any documents attached to this motion be filed under seal? (Documents filed under seal are not available to the public.)

Yes

No

If you answered yes, please list the documents in section IV of this form.



I. SENTENCE INFORMATION

Date of sentencing: 12/13/99

Term of imprisonment imposed: 360 MONTHS

Approximate time served to date: 21 YEARS, 6 MONTHS (258 months)

Projected release date: JANUARY 09, 2025

Length of Term of Supervised Release: 5 YEARS

Have you filed an appeal in your case?

Yes

No

Are you subject to an order of deportation or an ICE detainer?

Yes

No

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES¹

18 U.S.C. § 3582(c)(1)(A) allows you to file this motion (1) after you have fully exhausted all administrative rights to appeal a failure of the Bureau of Prisons to bring a motion on your behalf, or (2) 30 days after the warden of your facility received your request that the warden make a motion on your behalf, whichever is earlier.

Please include copies of any written correspondence to and from the Bureau of Prisons related to your motion, including your written request to the Warden and records of any denial from the Bureau of Prisons.

¹ The requirements for this compassionate release motion being filed with the court differ from the requirements that you would use to submit a compassionate release request to the Bureau of Prisons. This form should only be used for a compassionate release motion made to the court. If you are submitting a compassionate release request to the Bureau of Prisons, please review and follow the Bureau of Prisons program statement.

Have you personally submitted your request for compassionate release to the Warden of the institution where you are incarcerated?

Yes, I submitted a request for compassionate release to the warden on
6/25/20.

No, I did not submit a request for compassionate release to the warden.

If no, explain why not:

Was your request denied by the Warden?

Yes, my request was denied by the warden on (date): 7/14/20.
 No. I did not receive a response yet.

III. GROUNDS FOR RELEASE

Please use the checkboxes below to state the grounds for your request for compassionate release. Please select all grounds that apply to you. You may attach additional sheets if necessary to further describe the reasons supporting your motion. You may also attach any relevant exhibits. Exhibits may include medical records if your request is based on a medical condition, or a statement from a family member or sponsor.

A. Are you 70 years old or older?

Yes.
 No.

If you answered no, go to Section B below. You do not need to fill out Section A.

If you answered yes, you may be eligible for release under 18 U.S.C. § 3582(c)(1)(A)(ii) if you meet two additional criteria. Please answer the following questions so the Court can determine if you are eligible for release under this section of the statute.

Have you served 30 years or more of imprisonment pursuant to a sentence imposed under 18 U.S.C. § 3559(c) for the offense or offenses for which you are imprisoned?

Yes.

No.

Has the Director of the Bureau of Prisons determined that you are not a danger to the safety of any other person or the community?

Yes. "PATTERN" RISK SCORE = MINIMUM

No.

B. Do you believe there are other extraordinary and compelling reasons for your release?

Yes.

No.

If you answered "Yes," please check all boxes that apply so the Court can determine whether you are eligible for release under 18 U.S.C. § 3582(c)(1)(A)(i).

I have been diagnosed with a terminal illness.

I have a serious physical or medical condition; a serious functional or cognitive impairment; or deteriorating physical or mental health because of the aging process that substantially diminishes my ability to provide self-care within the environment of a correctional facility, and I am not expected to recover from this condition.

I am 65 years old or older and I am experiencing a serious deterioration in physical or mental health because of the aging process.

The caregiver of my minor child or children has died or become incapacitated and I am the only available caregiver for my child or children.

My spouse or registered partner has become incapacitated and I am the only available caregiver for my spouse or registered partner.

There are other extraordinary and compelling reasons for my release.

Please explain below the basis for your request. If there is additional information regarding any of these issues that you would like the Court to consider but which is confidential, you may include that information on a separate page, attach the page to this motion, and, in section IV below, request that that attachment be sealed.

THERE IS A WIDESPREAD COVID-19 OUTBREAK CURRENTLY AT BEAUMONT-LAW DESPITE THE INSTITUTION'S EFFORTS AND CLAIMS. ON NOV. 06. 2020, I TESTED POSITIVE FOR COVID-19 AND HAD SEVERAL SYMPTOMS. NO MEDICAL TREATMENT OF ANY KIND WAS PROVIDED OR OFFERED, THERE IS NO CONCLUSIVE MEDICAL EVIDENCE ON THE LONG-TERM EFFECTS OF THIS VIRUS.
PLEASE LET ME HAVE THE CHANCE TO MEET ANY NEEDS WITH PRIVATE INSURANCE AND AT HOME WITH MY FAMILY'S LOVE,

- IT IS IMPOSSIBLE TO SOCIAL/PHYSICAL DISTANCE IN TIGHT OPEN-DORMS,
- BUNK BEDS ARE LESS THAN 3 FEET APART.
- TOILETS, SHOWERS, SINKS ARE CONSTANTLY BROKEN. MOLD IS PREVALENT.

IV. ATTACHMENTS AND REQUEST TO SEAL

Please list any documents you are attaching to this motion. A proposed release plan is included as an attachment. You are encouraged but not required to complete the proposed release plan. A cover page for the submission of medical records and additional medical information is also included as an attachment to this motion. Again, you are not required to provide medical records and additional medical information. For each document you are attaching to this motion, state whether you request that it be filed under seal because it includes confidential information.

Document	Attached?	Request to seal?	
Proposed Release Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Additional medical information	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<u>ADDITIONAL COMPELLING REASON</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

V. REQUEST FOR APPOINTMENT OF COUNSEL

I do not have an attorney and I request an attorney be appointed to help me.

Yes

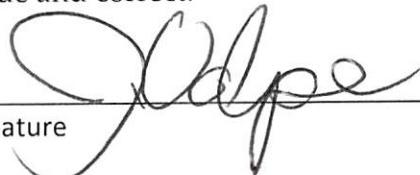
No

VI. MOVANT'S DECLARATION AND SIGNATURE

For the reasons stated in this motion, I move the court for a reduction in sentence (compassionate release) under 18 U.S.C. § 3582(c)(1)(A). I declare under penalty of perjury that the facts stated in this motion are true and correct.

12/10/20

Date



Signature

JUSTIN VOLPE

Name

49477-053

Bureau of Prisons Register #

BEAUMONT-LOW / FEDERAL CORRECTIONAL INSTITUTION

Bureau of Prisons Facility

P.O. BOX 26020 / BEAUMONT, TEXAS 77720-6020

Institution's Address

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

UNITED STATES DISTRICT COURT
FOR THE
ED DISTRICT OF NY

UNITED STATES OF AMERICA

Case No. 1-98-cr-00196-RR
(write the number of your criminal
case)

v.

JUSTIN VOLPE

Write your full name here.

PROPOSED RELEASE PLAN

In Support of Motion for Sentence Reduction Under 18 U.S.C. § 3582(c)(1)(A)

NOTICE

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If you provide information in this document that you believe should not be publicly available, you may request permission from the court to file the document under seal. If the request is granted, the document will be placed in the electronic court files but will not be available to the public.

Do you request that this document be filed under seal?

Yes

No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

PROPOSED RELEASE PLAN

To the extent the following information is available to you, please include the information requested below. This information will assist the U.S. Probation and Pretrial Services Office to prepare for your release if your motion is granted.

A. Housing and Employment

Provide the full address where you intend to reside if you are released from prison:

591 RATHBUN AVENUE
STATEN ISLAND, NEW YORK 10312

Provide the name and phone number of the property owner or renter of the address where you will reside if you are released from prison:

CAROLINE VOLPE (SPOUSE) #(409) 730-5855

Provide the names (if under the age of 18, please use their initials only), ages, and relationship to you of any other residents living at the above listed address:

NICHOLAS DEMASO (STEP SON) 29

If you have employment secured, provide the name and address of your employer and describe your job duties:

RICHARD PUTONI (OWNER/EMPLOYER) "CAPE HOUSE GALLERY
FRAMING/CLERK, ETC. 7440 AMBOY ROAD/S.I. NY 10307

List any additional housing or employment resources available to you:

FAMILY HOME; 21 PINE LANE/HUNTER, NY 12442
OTHER FAMILY HOMES ON STATEN ISLAND

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

B. Medical needs

Will you require ongoing medical care if you are released from prison?

- Yes SOME / DENTAL
 No

Will you have access to health insurance if released?

- Yes
 No

If yes, provide the name of your insurance company and the last four digits of the policy number. If no, how do you plan to pay for your medical care?

UNITED HEALTH CARE 2604

If no, are you willing to apply for government medical services (Medicaid/Medicare)?

- Yes N/A?
 No

Do you have copies of your medical records documenting the condition(s) for which you are seeking release?

- Yes
 No

If yes, please include them with your motion. If no, where are the records located?

ALL MEDICAL RECORDS ARE AT "MEDICAL RECORDS DEPT."
AT PRISON LOCATION

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

Are you currently prescribed medication in the facility where you are incarcerated?

Yes

No

If yes, list all prescribed medication, dosage, and frequency:

I BUPRUFEN 800 (AS NEEDED)

Do you require durable medical equipment (e.g., wheelchair, walker, oxygen, prosthetic limbs, hospital bed)?

Yes

No

If yes, list equipment:

Do you require assistance with self-care such as bathing, walking, toileting?

Yes

No

If yes, please list the required assistance and how it will be provided:

Do you require assisted living?

Yes

No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

If yes, please provide address of the anticipated home or facility and the source of funding to pay for it.

Are the people you are proposing to reside with aware of your medical needs?

- Yes
 No

Do you have other community support that can assist with your medical needs?

- Yes
 No

Provide their names, ages, and relationship to you. If the person is under the age of 18, please use their initials only:

I AM GRATEFUL TO HAVE NUMEROVS NEIGHBORS AND CHURCH MEMBERS WHO HAVE EXTENDED SUPPORT FOR OVER 21 YEARS.

Will you have transportation to and from your medical appointments?

- Yes
 No

Describe method of transportation:

FAMILY VEHICLES

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

SIGNATURE

I declare under penalty of perjury that the facts stated in this attachment are true and correct.

12-10-20

Date

Signature



JUSTIN VOLPE

Name

49477-053

Bureau of Prisons Register #

BEAUMONT-LOW FEDERAL CORRECTIONAL INSTITUTION

Bureau of Prisons Facility

PO BOX 26020/ BEAUMONT, TEXAS 77720-6020

Institution's Address

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

UNITED STATES DISTRICT COURT
FOR THE
_____ DISTRICT OF _____

UNITED STATES OF AMERICA

v.
Case No. _____
(write the number of your criminal
case)

Write your full name here.

MEDICAL RECORDS AND ADDITIONAL MEDICAL INFORMATION
In Support of Motion for Sentence Reduction Under 18 U.S.C. § 3582(c)(1)(A)

NOTICE

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If you attach documents to this form that you believe should not be publicly available, you may request permission from the court to file those documents under seal. If the request is granted, the documents will be placed in the electronic court files but will not be available to the public.

Do you request that the attachments to this document be filed under seal?

Yes

No

ATTACHMENT TO MOTION FOR COMPASSIONATE RELEASE

MEDICAL RECORDS AND ADDITIONAL MEDICAL INFORMATION

To the extent you have medical records or additional medical information that support your motion for compassionate release, please attach those records or that information to this document.

SIGNATURE

I declare under penalty of perjury that the facts stated in this attachment are true and correct.

Date

Signature

Name

Bureau of Prisons Register #

Bureau of Prisons Facility

Institution's Address

IV. ADDITIONAL COMPELLING REASONS ATTACHMENT

REQUEST
TO SEAL

YOUR HONOR,

IN 1997, I COMMITTED A SERIOUS WRONG AND CRIME. I TAKE FULL RESPONSIBILITY AND LIVE WITH THE PAIN IT HAS CAUSED THE VICTIM, HIS FAMILY, AND OTHERS. FOR OVER TWO DECADES I HAVE TRIED TO LIVE IN A WAY TO MAKE UP FOR IT, INCLUDING COMPLETING OVER 145 CLASSES, FROM 3 VOCATIONAL TRAININGS, ONE 4-YEAR HVAC APPRENTICESHIP, VICTIM IMPACT, ANGER MANAGEMENT AND SPIRITUAL GROWTH COURSES.

IF SENTENCED IN 2020, THERE IS THE CHANCE A JUDGE COULD BE ALLOWED TO ISSUE A LOWER SENTENCE DUE TO "GUIDELINES" NOT BEING MANDATORY AND ABSOLUTE ANYMORE.

I DO NOT SEEK TO EVADE JUST PUNISHMENT FOR MY CRIME. I HAVE SERVED THE OVERWHELMING MAJORITY OF THE SENTENCE. AFTER 21 PLUS YEARS IN PRISON, IT IS MY FAMILY WHO IS BEING PUNISHED MORE. I RESPECTFULLY ASK FOR YOUR CONSIDERATION TO HAVE THE ABILITY TO HELP MY DEAR 76 YEAR OLD MOTHER (Grace) WHO IS A WIDOW AND NEEDS PHYSICAL AND EMOTIONAL HELP, AS WELL AS MY LOYAL WIFE (Caroline) WHO MEETS ALL THE DEMANDS OF A HOUSEHOLD ALL ON HER OWN DURING THESE TRYING AND UNCERTAIN TIMES.

THANK YOU FOR TAKING THE TIME TO CONSIDER THESE AND OTHER UNSPOKEN, HEARTFELT REASONS.

SINCERELY,

JUSTIN VOLPE

YOUR HONOR

George Mitchell

MALE PATTERN RISK SCORING

Register Number:	49777-053	Date:	7/15/2020		
Inmate Name:	Volpe				
MALE RISK ITEM SCORING	CATEGORY	GENERAL SCORE	Enter Score	VIOLENT SCORE	Enter Score
1. Current Age Click on gray dropdown box to select, then click on dropdown arrow	> 60	0	7	0	4
	51-60	7		4	
	41-50	14		8	
	30-40	21		12	
	26-29	28		16	
	< 26	35		20	
2. Walsh w/Conviction Yes	No	0	1	0	0
	Yes	1		0	
3. Violent Offense (PATTERN) Yes	No	0	5	0	5
	Yes	5		5	
4. Criminal History Points 0 - 1 Points	0 - 1 Points	0	0	0	0
	2 - 3 Points	8		4	
	4 - 6 Points	16		8	
	7 - 9 Points	24		12	
	10 - 12 Points	32		16	
	> 12 Points	40		20	
5. History of Escapes None	None	0	0	0	0
	> 10 Years Minor	2		1	
	5 - 10 Years Minor	4		2	
	< 5 Years Minor/Any Serious	6		3	
6. History of Violence > 10 Years Minor	None	0	1	0	1
	> 10 Years Minor	1		1	
	> 15 Years Serious	2		2	
	5 - 10 Years Minor	3		3	
	10 - 15 Years Serious	4		4	
	< 5 Years Minor	5		5	
	5 - 10 Years Serious	6		6	
	< 5 Years Serious	7		7	
7. Education Score HS Degree / GED	Not Enrolled	0	-4	0	-2
	Enrolled in GED	-2		-1	
	HS Degree / GED	-4		-2	
8. Drug Program Status No DAP Completed	No DAP Completed	0	0	0	0
	NRDAP Complete	-3		-1	
	RDAP Complete	-6		-2	
	No Need	-9		-3	
9. All Incident Reports (120 months)	0	0	1	0	1
	1	1		1	
	2	2		2	
	> 2	3		3	
10. Serious Incident Reports (120 months)	0	0	0	0	0
	1	2		2	
	2	4		4	
	> 2	6		6	
11. Time Since Last Incident Report 12+ months or no incidents	12+ months or no incidents	0	0	0	0
	7-12 months	2		1	
	3-6 months	4		2	
	<3	6		3	
12. Time Since Last Serious Incident Report 12+ months or no incidents	12+ months or no incidents	0	0	0	0
	7-12 months	1		2	
	3-6 months	2		4	
	<3	3		6	
13. FRP Refuse NO	NO	0	0	0	0
	YES	1		1	
14. Programs Completed 4 - 10	0	0	-6	0	-3
	1	-2		-1	
	2 - 3	-4		-2	
	4 - 10	-6		-3	
	> 10	-8		-4	
15. Work Programs >1 Program	0 Programs	0	-2	0	-2
	1 Program	-1		-1	
	>1 Program	-2		-2	
Total Score (Sum of Columns)		General:	3	Violent:	4
General/Violent Risk Levels		General:	Minimum	Violent:	Minimum
OVERALL MALE PATTERN RISK LEVEL		Minimum			

"PATTERN RISK SCORE" = MINIMUM

JUSTIN VOLPE #49477-053

CASE NO. 1-98-cr-00196-RR

- BP - 9

- BP - 8

COMPASSIONATE
RELEASE

CORONA VIRUS
2020

JUSTIN VOLPE, 49477-053
BEAUMONT LOW FCI UNT: WA QTR: W04-055U
P.O. BOX 26025
BEAUMONT, TX 77720

8-88 -

STAR WARS

LEIA

ANHANOS

CSOS

FEDERAL CORRECTIONAL COMPLEX (FCC), BEAUMONT, TEXAS
PART B - RESPONSE TO REQUEST FOR ADMINISTRATIVE REMEDY # 1031355-F1

This is in response to your Request for Administrative Remedy received July 6, 2020, in which you request home confinement in connection with the CARES Act.

The Bureau of Prisons is utilizing the full scope of its various authorities to ensure that inmates at heightened risk of complications from COVID-19 are identified and housed safely and appropriately given their specific needs and circumstances. This includes modified institution operations; routine staff and inmate medical screening; use of the home confinement authority, where appropriate, based on guidance from the U.S. Attorney General; and use of compassionate release for appropriate inmates who have existing terminal and debilitated medical conditions or who are elderly and nearing the end of their sentence, as provided for in current agency policy.

The CARES Act authorizes the U.S. Attorney General to expand the cohort of inmates who can be considered for home confinement upon his findings of emergency conditions which are materially affecting the function of the BOP. On April 3, 2020, the U.S. Attorney General made that finding and authorized the Director of the BOP to immediately maximize appropriate transfers to home confinement of all appropriate inmates held at FCI Oakdale, FCI Danbury, FCI Elkton, and other similarly situated BOP facilities where COVID-19 is materially affecting operations.

The U.S. Attorney General issued guidance to the BOP regarding the transfer of inmates to home confinement on March 26, 2020. The Central Office also listed the following criteria which should be met when reviewing and referring inmates for home confinement: primary or prior offense history does not include violence, a sex offense, or terrorism related; no detainer; PATTERN risk score is Minimum; reviewing inmate's institution discipline history for the last 12 months; verifiable release plan; inmate must have served at least 50% of their sentence, or have 18 months or less remaining on their sentence and have served 25% or more of their sentence.

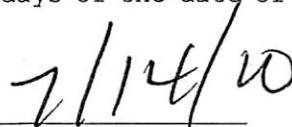
Information reveals you arrived at FCC Beaumont on July 20, 2018, with a Projected Release Date of January 9, 2025, via Good Conduct Time Release. You did not meet the criteria to be released on home confinement per the CARES Act, nor are you identified as an at-risk inmate per any medical condition by the Health Services Department. Specifically, you were denied based on your current conviction for a sex offense.

Based on the above information, this response to your Request for Administrative Remedy is denied.

If you are not satisfied with this response, you may appeal to the Regional Director at Bureau of Prisons, South Central Region, South Central Regional Office, 344 Marine Forces Drive, Grand Prairie, Texas, 75051. Your appeal must be received in the South Central Regional Office within 20 days of the date of this response.


F. J. Garrido, Warden

Date


7/14/20

U.S. DEPARTMENT OF JUSTICE
Federal Bureau of Prisons

REQUEST FOR ADMINISTRATIVE REMEDY

Type or use ball-point pen. If attachments are needed, submit four copies. Additional instructions on reverse.

From: VOLPE, JUSTIN LAST NAME, FIRST, MIDDLE INITIAL REG. NO. 49477-053 UNIT WA INSTITUTION BEAUMONT-LOW

Part A- INMATE REQUEST

I AM REQUESTING BEAUMONT-LOW(TEXAS) WARDEN F.J. GARRIDO TO RECOMMEND TO GENERAL COUNSEL TO FILE A MOTION FOR REDUCTION IN SENTENCE ON REQUESTER'S BEHALF PURSUANT TO COMPASSIONATE RELEASE, 18 USC 3582(c)(1)(A)(i)

REQUESTER STATES THE FOLLOWING (ATTACHED)
EXTRAORDINARY AND COMPELLING REASONS IN
SUPPORT OF THESE REQUESTS.

6/25/20
DATE

(* SEE ATTACHED)
CONTINUATION

SIGNATURE OF REQUESTER

Part B- RESPONSE

DATE

WARDEN OR REGIONAL DIRECTOR

If dissatisfied with this response, you may appeal to the Regional Director. Your appeal must be received in the Regional Office within 20 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER:

CASE NUMBER:

Part C- RECEIPT

Return to:

LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

CONTINUES.
REQUEST FOR MOTION FOR REDUCTION TO BE FILED BY B.O.P.
SPECIFIC COMPLAINT AND REQUESTED RELIEF CONTINUES:

- 1) THERE ARE CONFIRMED CORONA INFECTIONS OF PRISONERS AND STAFF AT BEAUMONT-LOW (TEXAS)
- 2) B.O.P. STAFF ARE NOT TESTED FOR CORONA-VIRUS/COVID-19 UPON REPORTING TO WORK DAILY AT BML (BEAUMONT-LOW)
- 3) B.O.P. PRISONERS ARE NOT TESTED FOR CORONA/COVID.
- 4) PHYSICAL DISTANCING ("SOCIAL DISTANCING") OF SIX FEET IS IMPOSSIBLE AT BEAUMONT LOW, NAMELY:
 - A) ASSIGNED TO A CUBE APPROXIMATELY 6'x10" WITH 5 WALLS NO DOORS, CONTAINING 3 BUNKS, 3 LOCKERS 33" H x 24" x 18" DEEP, FIXED TO WALL TABLE 30" H x 30" LONG x 15" DEEP, BUNK LENGTH 77" x 30" W.
*THE DISTANCE BETWEEN BUNKS IS 33 INCHES, *
 - B) TO CUBES ON WA-UNIT 65, AS OF JUNE APPROXIMATELY 150 PRISONERS ASSIGNED TO UNIT.

REQUESTOR AVERS THAT THE CONDITION SET OUT HEREIN ARE EXTRAORDINARY, COMPELLING, AND CAN BE FATAL TO THIS PRISONER DUE TO PRISON STAFF RETURNING FROM A CORONA VIRUS/COVID-19 WORLD AND ENTERING PRISON UNTESTED FOR CORONA/COVID. MOREOVER, TEMPERATURE CHECKS OF STAFF DOES NOT DETECT CORONA/COVID WHO ARE SYMPTOMATIC AND ASYMPTOMATIC. FINALLY, BEAUMONT PRISON'S JEFFERSON COUNTY HAS HAD A RISE IN CORONA INFECTIONS AND CORONA/COVID DEATHS. MOREOVER, TEXAS HAS/IS HAVING A RISE IN CORONA/COVID INFECTIONS AND DEATH.

- REQUESTOR HAS COMPLETED OVER 160 EDUCATIONAL COURSES, INCLUDING SEVERAL VOCATIONAL TRAINING AND VICTIM IMPACT
- REQUESTOR WAS SENTENCED IN 1999 TO 360 MONTHS FOR CIVIL RIGHTS VIOLATION AND RELATED OFFENSES. DISCHARGE DATE IS JAN. 2025. (80% TIME SERVED)
- REQUESTOR DOES NOT POSE AND IS NOT A THREAT TO THE SAFETY OF ANY PERSON IN THE COMMUNITY
- IF RELIEF/REDUCTION IN SENTENCE IS GRANTED I WILL LIVE WITH MY WIFE CAROLINE VOLPE AT 591 RATHBUN AVE STATEN ISLAND, NEW YORK 10312 AND CAN PROVIDE JOB OFFER.

RESPECTFULLY REQUESTED,
JUSTIN VOLPE #49477-053 Q, Volpe

DOCUMENTATION OF INFORMAL RESOLUTION ATTEMPT

Bureau of Prisons Program Statement No. 1330.13, Administrative Remedy Program, (December 22, 1995), requires, in most cases, that inmates attempt informal resolution of grievances prior to filing a formal written complaint. This form shall be used to document your efforts towards informally resolving your grievance.

Inmate Name: JUSTIN VOLPE Reg. No.: 49477-053 Unit: WA

Specific Complaint and Requested Relief: I AM REQUESTING THE BEAUMONT-LW WA-TEAM (UNIT MANAGER TAYLOR, CASE MANAGER KILLEEN) AND WARDEN GARRIDO TO RECOMMEND TO THE GENERAL COUNSEL TO FILE A MOTION FOR REDUCTION IN SENTENCE ON REQUESTOR'S BEHALF PURSUANT TO THE CARES ACT, FIRST STEP ACT (PSA), AND 18 USC 3582 (c)(1)(A)(i) FOR COMPASSIONATE RELEASE. ADDITIONALLY, I AM REQUESTING THE WA-TEAM AND WARDEN GARRIDO TO GRANT REQUESTOR RELEASE TO HOME CONFINEMENT. REQUESTOR STATES THE BELOW (REVERSE IDE OF THIS BP-9) EXTRAORDINARY AND COMPELLING REASONS IN SUPPORT OF THESE REQUESTS →
* SEE ATTACHED)

Efforts Made By Inmate To Informally Resolve Grievance (be specific):

SUBMITTED TO WARDEN GARRIDO, UNIT MANAGER TAYLOR AND CASE MANAGER KILLEEN TO NO SATISFACTORY RESOLUTION,

Counselor's Comments:

See Attached

DA

6-25-20

Correctional Counselor's Review/Date

R. Taylor/z

6-24-20

Unit Manager's Review/Date

Date Given to Inmate:
Staff:

Date Returned to Staff:
Staff:

Date Given Bp-9:
Staff:

DOCUMENTATION OF INFORMAL RESOLUTION ATTEMPT (BP-8)
CONTINUES.

REQUEST FOR JUSTIN VOLPE #49477-053 BML UNIT WA

REQUEST FOR MOTION FOR REDUCTION TO BE FILED BY B.O.P.
SPECIFIC COMPLAINT AND REQUESTED RELIEF CONTINUES:

- 1) THERE ARE CONFIRMED CORONA INFECTIONS OF PRISONERS AND STAFF AT BEAUMONT-LOW (TEXAS)
- 2) B.O.P. STAFF ARE NOT TESTED FOR CORONA-VIRUS/COVID-19 UPON REPORTING TO WORK DAILY AT BML (BEAUMONT-LOW)
- 3) B.O.P. PRISONERS ARE NOT TESTED FOR CORONA/COVID PHYSICAL DISTANCING ("SOCIAL DISTANCING") OF SIX FEET IS IMPOSSIBLE AT BEAUMONT-LOW, NAMELY:
 - A) ASSIGNED TO A CUBE APPROXIMATELY 6' X 10" WITH 5 WALLS NO DOORS, CONTAINING 3 BUNKS, 3 LOCKERS 33" H X 24" X 18" DEEP, FIXED TO WALL TABLE 30" H X 30" LONG X 15" DEEP, BUNK LENGTH 77" X 30" W.
THE DISTANCE BETWEEN BUNKS IS 33 INCHES.
 - B) TO CUBES ON WA-UNIT 65, AS OF JUNE APPROXIMATELY 150 PRISONERS ASSIGNED TO UNIT.

REQUESTOR AVERS THAT THE CONDITION SET OUT HEREIN ARE EXTRAORDINARY, COMPELLING, AND CAN BE FATAL TO THIS PRISONER DUE TO PRISON STAFF RETURNING FROM A CORONA VIRUS/COVID-19 WORLD AND ENTERING PRISON UNTESTED FOR CORONA/COVID. MOREOVER, TEMPERATURE CHECKS OF STAFF DOES NOT DETECT CORONA/COVID WHO ARE SYMPTOMATIC AND ASYMPTOMATIC. FINALLY, BEAUMONT PRISON'S JEFFERSON COUNTY HAS HAD A RISE IN CORONA INFECTIONS AND CORONA/COVID DEATHS. MOREOVER, TEXAS HAS/IS HAVING A RISE IN CORONA/COVID INFECTIONS AND DEATH.

- REQUESTOR HAS COMPLETED OVER 160 EDUCATIONAL COURSES, INCLUDING SEVERAL VOCATIONAL TRAINING AND VICTIM IMPACT
- REQUESTOR WAS SENTENCED IN 1999 TO 360 MONTHS FOR CIVIL RIGHTS VIOLATION AND RELATED OFFENSES.
- DISCHARGE DATE IS JAN. 2025 (80% TIME SERVED)
- REQUESTOR DOES NOT POSE AND IS NOT A THREAT TO THE SAFETY OF ANY PERSON IN THE COMMUNITY
- IF RELIEF/REDUCTION IN SENTENCE IS GRANTED I WILL LIVE WITH MY WIFE CAROLINE VOLPE AT 591 RATHABUN AVE STATEN ISLAND, NEW YORK 10312 AND CAN PROVIDE JOB OFFER.

RESPECTFULLY REQUESTED,

JUSTIN VOLPE #49477-053

J. Volpe

Informal Resolution Response: Justin Volpe 49477-053

Health Services reviewed all inmates to determine who was considered at-risk, and you were not identified as an at-risk inmate by the Health Services Department. In addition, you do not meet the criteria to be released on home confinement per the CARES Act, based on your primary offense being a sex offense.

If you are requesting a Compassionate Release/Reduction in Sentence based on COVID-19, the proper procedure to initiate this request is to submit an electronic cop-out to the Warden's mailbox.

R. Taylor, Unit Manager

TRW 6-24-20

TRULINCS 49477053 - VOLPE, JUSTIN - Unit: BML-W-A

FROM: 49477053
TO: Warden LOW
SUBJECT: ***Request to Staff*** VOLPE, JUSTIN, Reg# 49477053, BML-W-A
DATE: 06/25/2020 10:02:45 AM

To: Warden F.J. Garrido
Inmate Work Assignment: Rec

Dear WARDEN Garrido,

June 25, 2020

I received back a reply from a BP-8 in which i was directed by unit manager taylor to initiate an electronic cop-out if seeking COMPASSIONATE RELEASE. I previously submitted one asking for consideration in cares act, first step ,and compassionate release.

Please let * this cop-out/request today be specifically for a request for :
COMPASSIONATE RELEASE : 18 USC 3582 (c)(1)(a)(i)

The following are the EXTRAORDINARY and COMPELLING reasons in support of my (requester) request :

1) There ARE confirmed cases of CORONA-VIRUS at this facility: Beaumont-Low ,TEXAS of both staff and inmates.

2) B.O.P. staff are not tested for corona-virus/covid-19 upon reporting to work daily at BML(Beaumont-low)

3) B.O.P. prisoners are not tested for corona/covid

4) Physical distancing ("social distancing") of six feet is IMPOSSIBLE at Beaumont-low institution. Namely :

a) asssigned to a cube that is approximately 6 ' x 10 ' with 5' walls and NO doors, containing 3 bunks, 3 lockers 33" h x24"w x18" d, fixed-to-wall table/desk 30 " h x 30" l x 15" d, bunk length 77" x 30" w.

* the DISTANCE BETWEEN BUNKS is 33 Inches *

b) cubes on WA-unit is 65 in number. as of june approximately 150 prisoners assigned to unit

5) Correctional Officers that come onto WA-unit also work or travel to other units, negating the "quarantine efforts".

Requester avers that the conditionset out herein are EXTRAORDINARY, COMPELLING ,and can be FATAL to this prisoner due to staff returning from a corona-virus/covid-19 world and entering the prison untested for corona/covid. Moreover, temperature checks of staff does not detect corona/covid who are symptomatic and asymptomatick. Finally ,Beaumont prison's Jefferson county has had a rise in corona/covid infections and death.

- Requester has completed over 160 educational courses, including several vocational training and victim impact, and anger management and more.

-requester was sentenced in 1999 to 360 months for civil rights violation and related assault offenses.

discharge date is jan. 2025 (80 % stat. time served.)

- requester does not pose a threat to the safety of any person in the community and maintain deep ties with family, friends in the community and church leaders.

- if relief /reduction in sentence is granted, I will live with my dear wife Caroline Volpe at 591 Rathbun avenue, Staten island, New York 10312. several job offers have been stated by local businesses.

I sincerely ask you to consider to give me the chance to avoid this virus and to go help my family in need at home.

Thank you . Respectfully requested,

Justin Volpe

49477-053

TRULINCS 49477053 - VOLPE, JUSTIN - Unit: BML-W-A

FROM: 49477053
TO: Warden LOW
SUBJECT: ***Request to Staff*** VOLPE, JUSTIN, Reg# 49477053, BML-W-A
DATE: 06/24/2020 07:26:33 AM

To: WARDEN F.J. Garrido
Inmate Work Assignment: Rec

Dear WARDEN GARRIDO,

I respectfully submit to you the following/attached email ,that i also sent to UNIT MANAGER Taylor and CASE MANAGER Killen.

Thank you for your assistance in this urgent and important matter,

Justin Volpe
49477-053

-----VOLPE, JUSTIN on 6/23/2020 10:23 PM wrote:

>

Dear UNIT MANAGER Taylor /CASE MANAGER Killen,

I am requesting you and WARDEN F.J. Garrido to recommend to the general counsel to file a motion for reduction in sentence on requestor's behalf pursuant to the CARES ACT, FIRST STEP ACT (FSA) , and 18 USC 3582(c)(1)(a) (i) for COMPASSIONATE RELEASE. Additionally , i am requesting the Beaumont wa-team and warden Garrido to grant requestor release to HOME CONFINEMENT.

Requestor states below EXTRAORDINARY AND COMPELLING REASONS in support of these requests:

1) B.O.P.staff are not tested for corona-virus/covid-19 upon reporting to work daily at Beaumont(texas) -low.

2) BOP prisoners are not tested for corona/covid

3) Physical distancing("social distancing") of 6 feet is impossible at Beaumont-low. Namely:

a) assignment to a cube of approximately 6' x 10' with 5' walls and NO door, containing 3 bunks, 3 lockers (33" h x24"wx18"d), fixed-to-the-wall table 30" hx30"long x15"d, bunk length 77" x 30"w .
the distance between bunks is 33 INCHES.

b) there are 65 cubes on wa-unit/beaumont and currently approximately 158 prisoners assigned to the unit.

4)There are CONFIRMED CASES OF INMATES AND STAFF at BEAUMONT-LOW with the CORONA-VIRUS/COVID 19.

Requestor avers that the condition set out herein are EXTRAORDINARY ,COMPELLING, and can be FATAL to this prisoner due to staff returning from a corona virus/covid-19 world and entering the prison untested for corona/covid 19. Moreover, temperature checks of staff does not detect corona /covid who are symptomatic or asymptomatic.

Finally, Beaumont 's Jefferson County has had a rise in corona infections and related deaths.

Moreover, TEXAS has had a rise in corona/covid infections and deaths.

Requested has completed over 160 educational courses including several Vocational Training , Victim Impact, and has received a Special Award from a Warden of Rochester FMC Minnesota for exceptional work during inclement weather on a needed steam pipe project.

Requested was sentenced to 360 months for civil rights violation and related offenses in 1999. Discharge date jan.2025
80 % statutory time served.

Requestor does not pose and is not a threat to any person here or in the community.

If reduciton in sentence /releif is granted requestoor will live/reside with my wife Caroline Volpe at 591 Rathbun ave.
Staten island,NY. 10312 . (another family residence is immediately available in Hunter,NY 12442

Respectfully requested ,
Justin Volpe
49477-053

ADMINISTRATIVE REMEDIES (EXHAUSTED)

FOR

JUSTIN VOLPE

49477-053

IN CLERK'S OFFICE
U.S. DISTRICT COURT E.D.N.Y.

CASE# 1-98-cr-00196-RR

DEC 23 2020

★

BROOKLYN OFFICE

JUSTIN VOLPE

49477-053
FEDERAL CORRECTIONAL INSTITUTION

BEAUMONT, TEXAS
PO BOX 26020
BEAUMONT, TEXAS 77720-6020

AFSM 4 N Hou 773
FRI 11 DEC 2020 PM



U.S.M.S.

Honorable Judge Block

U.S. DISTRICT COURT

E.D.N.Y.

225 CADMAN PLAZA EAST

Brooklyn, New York 11201

